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SET	Collaborator if any	Artist	ALANIZ	CHIAM	A	
P L E A P R I N	Address 20 78 U	CITY COUNTY (IF SHIPMENT	SS		Tel. <i>WO 1-34</i> -	5
Please enc	lose Registration Fee of \$2.00	(Check or Money Order) with Entry Blank.				
NUMBER FO SALE	OR NUMBER IN PRICE EDITION (Graphic Prts.)	TITLE	MEDIUM	CLASS	DO NOT WRITE IN THESE COLUMNS	
NUMBER FO	EDITION	TAMATAVE	MEDIUM W.C.	CLASS	DO NOT WRITE IN THESE COLUMNS	1
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SUBMIT ENTRY BLANK NO LATER THAN MARCH 19, 1962.

Use second blank if required

Permission to print prices on labels granted unless declined here.

IMPORTANT

This entry blank must be fully made out, (typewritten or plainly printed) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1962.

The submission of entries will be construed as acceptance of all conditions printed in this entry blank.

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